

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**Applicant(s)** : SIMS et al  
**Serial No.** : 10/595,672  
**Filed** : May 3, 2006  
**Examiner** : Not Yet Assigned  
**Group Art Unit:** 3766  
**For** : LIFE SIGN DETECTION AND HEALTH STATE ASSESMENT  
SYSTEM

**REQUEST TO CORRECT POWER OF ATTORNEY**


Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

The Applicant wishes to note that the Power of Attorney for the above-identified application should be associated, jointly and severally, all of the practitioners associated with **Customer Number 22440** as the attorneys and/or agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence and telephone calls to **Allen I. Rubenstein** at the address and telephone number associated with the Customer Number identified above as noted on the Combined Declaration and Power of Attorney previously submitted. The applicant respectfully requests this change be noted and a corrected filing receipt be issued.

Respectfully submitted,

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Dated: February 18, 2009